

APPLICATION DATA SHEET

Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:

Computer Readable Form (CRF)? No

Number of Copies of CRF::

Title:: PRESSURE-CONTACT TYPE RECTIFIER

Attorney Docket Number:: 1018760-000029

Request for Early Publication? No

Request for Non-Publication? No

Suggested Drawing Figure::

Total Drawing Sheets:: 5

Small Entity? No

Latin Name::

Variety Denomination Name::

Petition Included? No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Shinichi

Middle Name::

Family Name:: ITO

Name Suffix::

City of Residence:: Tokyo

State or Province of Residence::

Country of Residence:: Japan

Street of Mailing Address:: c/o MITSUBISHI DENKI KABUSHIKI KAISHA, 7-3, Marunouchi 2-chome, Chiyoda-ku

City of Mailing Address:: Tokyo

State or Province of Mailing Address::

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 100-8310

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name::	Shigeki
Middle Name::	
Family Name::	MAEKAWA
Name Suffix::	
City of Residence::	Tokyo
State or Province of Residence::	
Country of Residence::	Japan
Street of Mailing Address::	c/o MITSUBISHI DENKI KABUSHIKI KAISHA, 7-3, Marunouchi 2-chome, Chiyoda-ku
City of Mailing Address::	Tokyo
State or Province of Mailing Address::	
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	100-8310
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Hiroya
Middle Name::	
Family Name::	IKUTA
Name Suffix::	
City of Residence::	Tokyo
State or Province of Residence::	
Country of Residence::	Japan

Street of Mailing Address::	c/o MITSUBISHI DENKI KABUSHIKI KAISHA, 7-3, Marunouchi 2-chome, Chiyoda-ku
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State or Province of Mailing Address::	
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	100-8310
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Shigeharu
Middle Name::	
Family Name::	NAGAI
Name Suffix::	
City of Residence::	Tokyo
State or Province of Residence::	
Country of Residence::	Japan
Street of Mailing Address::	c/o MITSUBISHI DENKI KABUSHIKI KAISHA, 7-3, Marunouchi 2-chome, Chiyoda-ku
City of Mailing Address::	Tokyo
State or Province of Mailing Address::	
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	100-8310

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Toshiaki
Middle Name::	
Family Name::	KASHIHARA
Name Suffix::	
City of Residence::	Tokyo
State or Province of Residence::	
Country of Residence::	Japan
Street of Mailing Address::	c/o MITSUBISHI DENKI KABUSHIKI KAISHA, 7-3, Marunouchi 2-chome, Chiyoda-ku
City of Mailing Address::	Tokyo
State or Province of Mailing Address::	
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	100-8310
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Shinji
Middle Name::	
Family Name::	IWAMOTO
Name Suffix::	

City of Residence::	Tokyo
State or Province of Residence::	
Country of Residence::	Japan
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Postal or Zip Code of Mailing Address::	100-8310
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Takahiro
Middle Name::	
Family Name::	SONODA
Name Suffix::	
City of Residence::	Tokyo
State or Province of Residence::	
Country of Residence::	Japan
Street of Mailing Address::	c/o MITSUBISHI DENKI KABUSHIKI KAISHA, 7-3, Marunouchi 2-chome, Chiyoda-ku
City of Mailing Address::	Tokyo
State or Province of Mailing Address::	

Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 100-8310

Correspondence Information

Correspondence Customer Number:: 21839
Phone Number:: (703) 836-6620
Fax Number: (703) 836-2021

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/JP2004/006877	05/14/04

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
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Assignee Information

Assignee Name:: MITSUBISHI DENKI KABUSHIKI KAISHA
Street of Mailing Address:: 7-3, Marunouchi 2-chome, Chiyoda-ku
City of Mailing Address:: Tokyo
State or Province of Mailing Address::
Country of Mailing Address:: Japan
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